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Fill	in this information to identify your ca	ase:							
	otor 1 Leticia Gonz								
	otor 2 use, if filing)								
Uni	ted States Bankruptcy Court for the	: DISTRICT OF UTAH							
	ze number 21-24880						nt showin	ng postpetition	
Of	fficial Form 106I							ollowing date.	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
sup spo atta	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. 11: Describe Employment	are married and not filir r spouse is not filing wi	ng jointly, and your s th you, do not includ	spouse i de inforr	s liv natio	ing with you, incluen about your spo	ide inforr use. If m	nation about ore space is	your needed,
1.	Fill in your employment information.	Debtor 1			Debtor 2	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	✓ Employed☐ Not employed				☐ Employed ☐ Not employed		
		Occupation	Production						
	Include part-time, seasonal, or self-employed work.	Employer's name	Hyclone Laborat	Hyclone Laboratories LLC					
	Occupation may include student or homemaker, if it applies.	Employer's address	925 W 1800 S Logan, UT 84321	1					
		How long employed th	nere? 2 years						
Par	t 2: Give Details About Mor	nthly Income							
spou If yo	mate monthly income as of the da use unless you are separated. u or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co	· · ·					•	Ü
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	efore all payroll y wage would be.	2.	\$	3,163.00	\$	N/A		
3.	Estimate and list monthly overt		3.	+\$	54.00	+\$	N/A		
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	3,217.00	\$	N/A	

Deb	tor 1	Leticia Gonzalez		Case	number (if known)	21-248	80	
				For Debtor 1		For Debtor 2 or		
	•	or Box A boxes				non-filing sp		
	Сор	y line 4 here	4.	\$_	3,217.00	\$	N	<u>//A</u>
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	347.00	\$	N	/A
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N	/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	108.00	\$		//A
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$		<u>/A</u>
	5e. 5f.	Insurance	5e. 5f.	\$_ \$	314.00	\$ \$		<u>/A</u>
	5g.	Domestic support obligations Union dues	5g.	\$ \$	0.00	\$		<u> /A</u> /A
	5g. 5h.	Other deductions. Specify: Legal	5h.+			+ \$		I/A
		Long Term Disability	_	\$	11.00	\$		/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	797.00	\$	N	//A
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,420.00	\$	N	//A
8.		all other income regularly received:		· –		· —		
0.	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N	/A
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N	/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent						
		regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	299.00	\$	N	/A
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N	/A
	8e.	Social Security	8e.	\$_	0.00	\$	N	/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	N	/A
	8g.	Pension or retirement income	8g.	\$_	0.00	\$		/A
	8h.	Other monthly income. Specify:	_ 8h.+	\$_	0.00	+ \$	N	<u>//A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	299.00	\$!	N/A
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2,719.00 + \$		N/A = \$	2,719.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ		Σ,7 19.00		Ψ-	2,7 19.00
 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Sched Specify: 1 								0.00
12.	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies							2,719.00
								nbined othly income
13.	Do y	you expect an increase or decrease within the year after you file this form? No. Yes. Explain:	?					, , , , , , , , , , , , , , , , , , , ,

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Fill	in this inforn	nation to identify yo	our case:					
Deb	tor 1	Leticia Gonz	zalez			Che ✓	ck if this is: An amended filing	
	otor 2 ouse, if filing)						•	wing postpetition chapter the following date:
Unit	ed States Bar	nkruptcy Court for the	: DISTRI			MM / DD / YYYY		
1	e number nown)	21-24880						
Of	fficial F	orm 106J				•		
Be info	as complet ormation. If		s possible. eded, atta	If two married people a ch another sheet to this				
Par 1.	t 1: Des	cribe Your House oint case?	ehold					
	✓ No. Go	o to line 2. oes Debtor 2 live No	in a separ	ate household?				
			st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of Del	otor 2.	
2.	Do you ha	ave dependents?	☐ No					
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent				Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not sta dependent				Daughter		2	No✓ YesNoYesNoYesNoNo
3.	expenses	expenses include of people other t and your depende		No Yes				∟ Yes
exp	imate your	f a date after the	our bankru	ptcy filing date unless				apter 13 case to report If the form and fill in the
the		ich assistance an		government assistance luded it on <i>Schedule I:</i>			Your exp	enses
4.		I or home owners and any rent for th		ses for your residence. r lot.	Include first mortgag	e 4. :	\$	950.00
	If not incl	uded in line 4:						
	4a. Rea	l estate taxes				4a.	\$	0.00
		perty, homeowner's				4b.	·	0.00
		ne maintenance, re neowner's associat				4c. 3 4d. 3		0.00
5.				ur residence, such as h	ome equity loans	5. S	·	0.00

Debtor 1	Leticia Gonzalez	Case num	ber (if known)	21-24880
	tatan.			
. Util 6a.	ities: Electricity, heat, natural gas	6a.	\$	78.00
6b.	Water, sewer, garbage collection	6b.	·	5.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	:	75.00
6d.	Other. Specify:	6d.	\$	0.00
	od and housekeeping supplies	— 7.	\$	333.00
	Idcare and children's education costs	8.	\$	500.00
_	thing, laundry, and dry cleaning	9.	\$	5.00
	sonal care products and services	10.	\$	5.00
	dical and dental expenses	11.	·	50.00
	nsportation. Include gas, maintenance, bus or train fare.			00.00
	not include car payments.	12.	\$	10.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	\$	0.00
5. Ins	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.		0.00
	. Health insurance	15b.	·	0.00
	. Vehicle insurance	15c.		50.00
	. Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$	0.00
	tallment or lease payments:		_	
	. Car payments for Vehicle 1	17a.	·	483.00
	. Car payments for Vehicle 2	17b.	\$	0.00
	. Other. Specify:	17c.	\$	0.00
	. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as	18.	¢	0.00
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
	er payments you make to support others who do not live with you.	10	Φ	0.00
	ecify: her real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>	19.	vur Income	
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	· -	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	. Maintenance, repair, and upkeep expenses	20d.		0.00
	. Homeowner's association or condominium dues	20e.	·	0.00
	er: Specify:	21.	•	0.00
i. Otti	er. Specify.		ΤΨ	0.00
2. Cal	culate your monthly expenses			
22a	. Add lines 4 through 21.		\$	2,494.00
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	2,494.00
3. Cal	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,719.00
	. Copy your monthly expenses from line 22c above.	23b.	-\$	2,494.00
				,
230	. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	225.00
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you lification to the terms of your mortgage? No.			ease or decrease because of a
	Yes. Explain here:			